

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized CommitteeRECEIVED
2012 DEC 10 PM 12:00
Office Use Only: ENTER

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

CESAR HENAO FOR CONGRESS COMMITTEE

ADDRESS (number and street)

5023 SOLAR POINT DRIVE



Check if different than previously reported. (ACC)

GREENACRES

FL

33463

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C C00521534

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

FL

21

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M

D D

Y Y Y Y

in the State of

FL

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M 11

D D 06

Y Y Y Y 2012

in the State of

FL

5. Covering Period

M M 10

D D 18

Y Y Y Y 2012

through

M M 11

D D 26

Y Y Y Y 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mrs. Deana Cruz

Signature of Treasurer Mrs. Deana Cruz

Date

12 03 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
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Only**FEC FORM 3**
(Revised 02/2003)

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